

**Communicable Disease Epidemiology
and Immunization Section**

401 Fifth Avenue, Suite 900
Seattle, WA 98104-1818

206-296-4774 Fax 206-296-4803

TTY Relay: 711

www.kingcounty.gov/health

Public Health 
Seattle & King County

**Health Alert –Multistate *Burkholderia cepacia* Investigation with Possible Link to
Contaminated Oral Liquid Docusate Products, 30 June 2016**

Action requested:

- **Be aware of a multi-state outbreak investigation of *Burkholderia cepacia* infections with a possible link to oral liquid docusate products.**
- **Do not use any oral liquid docusate products for patients who are critically ill, ventilated, or immunosuppressed.**
- **Institutions with non-cystic fibrosis patients in whom there are *B. cepacia* infections should sequester all oral liquid docusate products.**
- **Immediately report confirmed or suspected *B. cepacia* cases, particularly those among non-cystic fibrosis patients in pediatric or adult ICUs since January 2016, to Public Health at (206) 296-4774 and notify infection control staff at your facility so that appropriate measures can be taken.**

Background:

The Centers for Disease Control and Prevention (CDC) is collaborating with the Food and Drug Administration (FDA), multiple state and local health departments, and numerous healthcare facilities to investigate a multi-state outbreak of *Burkholderia cepacia* infections. These infections have occurred primarily in ventilated patients without cystic fibrosis and who are being treated in intensive care units.

Preliminary information indicates that contaminated oral liquid docusate products might be related to cases in one state. There is no evidence to suggest oral capsules or enemas are affected. Until more information is available, CDC recommends that facilities not use any oral liquid docusate products for patients who are critically ill, ventilated, or immunosuppressed. Institutions with clusters of *B. cepacia* infections should sequester all oral liquid docusate products.

Healthcare providers and laboratories should be on alert for *B. cepacia* cases occurring among non-cystic fibrosis patients and should inform infection prevention staff and Public Health when these infections occur. In addition, clusters of *B. cepacia* infections among patients with cystic fibrosis can be reported when infection rates appear above endemic rates.

Resources

- CDC information on *B. cepacia* in healthcare settings:
<http://www.cdc.gov/HAI/organisms/bCepacia.html>